

Retail Food Inspection Report

Floyd County Health Department

Telephone (812) 948-4726

Establishment Name LIGHTNING FOOD MART	Telephone Number Est 812-944-0692 Own 812-989-1881	Date of Inspection 07/19/2021	ID#
Address 2620 CHARLESTOWN ROAD, NEW ALBANY IN 47150			
Owner BOB & TAMMY WOLFORD	Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up	Released 07/29/2021
Owner's Address 3101 CREEK RIDGE DR NEW ALBANY, IN 47150-		Menu Type 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	
Person in Charge CHRIST HAMM			
Responsible Person's Email			
Certified Food Handler			

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
347		X		Observed no handtowels at back of house hand washing sink.	1 day
355		X		When speaking to the person in charge they stated the mop water is occasionally discarded outside. All mop water should be discarded in white mop sink.	Today

Summary of Violations C 0 NC 2 R 0

Received by (name and title printed):

Inspected by (name and title printed):

Thomas Snider CFS

Received by (signature):

Inspected by (signature):

Thomas Snider

cc:

cc:

cc: